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PTO/SB/01 (12-97)

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	0037.00
	First Named Inventor	CLARK, ANDREW
	COMPLETE IF KNOWN	
	Application Number	09/414,384
	Filing Date	October 7, 1999
	Group Art Unit	1615
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		Unassigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLOW RESISTANCE MODULATED AEROSOLIZED ACTIVE AGENT DELIVERY

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **October 7, 1999** as United States Application Number or PCT International

Application Number **09/414,384** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

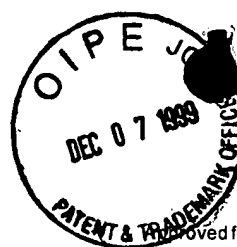
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/103,702	10/09/1998

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 21968

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 21968 OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

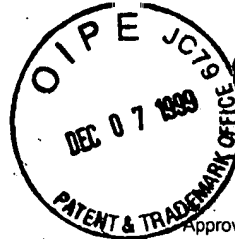
Family Name or Surname

ANDREW

CLARK

Inventor's Signature				Date	
Residence: City	Half Moon Bay	State	CA	Country	
				Citizenship	GB
Post Office Address	436 Valdez				
Post Office Address					
City	Half Moon Bay	State	CA	ZIP	94019
				Country	

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
CARLOS				SCHULER			
Inventor's Signature				Date			
Residence: City		Cupertino	State	CA	Country		Citizenship
Post Office Address		10344 Denison Avenue					
Post Office Address							
City		Cupertino	State	CA	ZIP	95014	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
STEVE				PABOOJIAN			
Inventor's Signature				Date			
Residence: City			State		Country		Citizenship
Post Office Address		2133 Avy Avenue					
Post Office Address							
City		Menlo Park	State	CA	ZIP	94025	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City			State		Country		Citizenship
Post Office Address							
Post Office Address							
City			State		ZIP		Country

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Practitioner's Docket No. 0037.00



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: CLARK, ANDREW ; SCHULER, CARLOS; and PABOOJIAN, STEVE
Application No.: 09/414,384 Group No.: 1615
Filed: 10/07/99 Examiner: Unassigned
For: FLOW RESISTANCE MODULATED AEROSOLIZED ACTIVE AGENT DELIVERY

Assistant Commissioner for Patents
Washington, D.C. 20231

**POWER OF ATTORNEY BY ASSIGNEE OF ENTIRE INTEREST
(REVOCATION OF PRIOR POWERS)**

As assignee of record of the entire interest of the above identified application,

REVOCATION OF PRIOR POWERS OF ATTORNEY

all powers of attorney previously given are hereby revoked and

NEW POWER OF ATTORNEY

the following practitioners are hereby appointed to prosecute and transact all business in the Patent and Trademark Office connected therewith.

Felissa H. Cagan, Registration No. 35089
Susan T. Evans, Registration No. 38443
Michael J. Rafa, Registration No. 38740

SEND CORRESPONDENCE TO:

Customer No.: 21968

DIRECT TELEPHONE CALLS TO:

(650) 631-3100

INHALE THERAPEUTIC SYSTEMS, INC.
150 Industrial Road
San Carlos, CA 94070

Recorded herewith

Date

W/29/99

Signature

Stephen L. Hurst
General Counsel



DECLARATION OR OATH

II. No declaration or oath was filed. Enclosed is the original declaration and Power of Attorney for this application.

COMPLETION FEES

III.

1. Filing Fee

Original patent application (37 C.F.R. 1.16(a))	\$760.00
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2. Surcharge Fee

Late payment of filing fee and/or late filing of original declaration or oath (37 C.F.R. 1.16(e))	\$130.00
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Total completion fees	\$890.00
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TOTAL FEE DUE

IV. The total fee due is:

Completion fees	\$890.00
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Total Fee Due \$890.00

PAYMENT OF FEES

V. Charge Account No. 500348 in the amount of \$890.00.

A duplicate of this request is attached.

Please charge Account No. 500348 for any fees that may be due by this paper.

Felissa H. Cagan 12/2/99
SIGNATURE OF PRACTITIONER

Reg. No. 35089

Tel No.: (650) 631-3100

Customer No.: 21968

Felissa H. Cagan
Inhale Therapeutic Systems, Inc.
150 Industrial Road
San Carlos, CA 94070